Telehealth Progress Note

Session details for video and phone sessions, then your clinical note

Session

Client name or ID | Date | Start to stop | Clinician and credentials

Modality ☐ Video ☐ Audio only ☐ Switched (note time)

Platform

Service / code

Telehealth details

Client location

State at session start | Client is at

Clinician location

Others present

Identity ☐ Established, recognized ☐ Verified (how) ☐ N/A

Telehealth consent ☐ On file (date) ☐ Reconfirmed today ☐ Not on file (stop)

Consent date / note

Emergency contact

Callback / backup plan

Local emergency

Audio only because

Technology problems

Clinical note (SOAP, DAP, BIRP or your format)

Concerns / data

Interventions

Response / progress

Risk inquiry ☐ Asked: denied ☐ Asked: present (see risk section) ☐ Not asked (why)

Plan

Next session, modality

Clinician signature and credentials | Date and time signed

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Telehealth Progress Note

Session details for video and phone sessions, then your clinical note

FILLED EXAMPLE · fictional client and clinician, for illustration only

Session

Client name or ID: J.P. (fictional example)

Date: 11/10/2026

Start to stop: 5:02 to 5:55 pm

Clinician and credentials: N. Alvarez, LPC (fictional)

Modality: [x] Video [ ] Audio only [ ] Switched (note time)

Platform: Practice EHR video platform (synchronous video)

Service / code: Individual psychotherapy, 53 min, session 6

Telehealth details

Client location: Home, address on file, confirmed by client at 5:02 pm

State at session start: NC

Client is at: Home (Raleigh), alone in bedroom, door closed

Clinician location: Private office at the practice, Raleigh, NC; no one else present

Others present: None on either end; partner out of the house

Identity: [x] Established, recognized [ ] Verified (how) [ ] N/A

Telehealth consent: [x] On file (date) [ ] Reconfirmed today [ ] Not on file (stop)

Consent date / note: Telehealth informed consent signed 9/29/2026

Emergency contact: Partner, phone on file, confirmed 9/29/2026

Callback / backup plan: Client cell on file; if video drops, clinician calls within 2 min

Local emergency: Nearest emergency department noted in chart; 988 by call or text

Audio only because: N/A (video)

Technology problems: Video froze about 30 sec at 5:31; audio continued; no content lost

Clinical note (SOAP, DAP, BIRP or your format)

Concerns / data: 2 panic attacks this week (was 5 before treatment), both on bus; peak fear 7/10.

Stayed on bus the second time. Homework 4 of 7 days. PDSS-SR 12 (intake 18).

Interventions: Interoceptive exposure on video: straw breathing 90 sec, fear rating 6 to 3.

Reviewed bus exposure; planned next situational step with ratings.

Response / progress: Engaged; mood "nervous but proud"; progress on objective 1.2 (2 attacks, goal 2 or fewer)

Risk inquiry: [x] Asked: denied [ ] Asked: present (see risk section) [ ] Not asked (why)

Plan: Ride bus 2 stops past work and walk back, twice this week, with ratings.

Daily interoceptive practice. Repeat PDSS-SR at session 8.

Next session, modality: 11/17, 5:00 pm, video; client will join from home

Clinician signature and credentials: N. Alvarez, LPC (fictional)

Date and time signed: 11/10/2026, 6:20 pm

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Before You Sign: Telehealth Note

Ten checks for every note, plus the telehealth items to confirm each session

Before you sign

- [ ] 1. The note is in your usual format and linked to a treatment plan objective.
- [ ] 2. Start and stop times (or total minutes) are recorded and add up.
- [ ] 3. Modality is written in words, and any switch to phone has a time.
- [ ] 4. Client location at session start includes the state.
- [ ] 5. Others present on both ends are named, or the client was alone.
- [ ] 6. Risk was asked about when indicated, and "denies" only if you asked.
- [ ] 7. Anything you could not observe on video or phone is stated.
- [ ] 8. Nothing is copied forward from last week's telehealth block.
- [ ] 9. Modality, location and time match the code, POS and modifier you bill.
- [ ] 10. Signed with credentials, dated and timed; corrections by dated addendum.

Telehealth items to confirm each session

Licensure	You are licensed or legally permitted to practice where the client is today. If the client is traveling, check before you start, and document what you decided.
Consent	Telehealth informed consent is on file. Anything new (audio only, a new person present, recording) is discussed and noted.
Emergency plan	Emergency contact and callback number are current. You know the nearest emergency department and how to reach local help from where you are. 988 is available by call or text.
Backup plan	Client knows what happens if video drops: who calls whom, on which number, and how long to wait.
Audio only	The reason for audio only is written down, for example no video capable device, or the client declined video today.
Privacy	Both ends are private. Platform is one your practice has vetted, with a business associate agreement where one is needed. No recording without consent.
Payer rules	POS code (02 or 10 for many payers), modifier (95 for video, 93 for audio only for many payers) and any extra payer rules are checked. Rules vary by payer and state.

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